

010604

22912 U.S. PTO

UTILITY  
PATENT APPLICATION  
TRANSMITTAL(only for new nonprovisional applications under 37 CFR  
1.53(b))

Attorney Docket No.

ORT1563NP

Applicant

Anton Bittner et al.

Title

Methods And Algorithms For Performing Quality Control  
During Gene Expression Profiling On DNA Microarray  
Technology

Express Mail Label No.

EV291407865US

22264 U.S. PTO  
10/753107

010604

## APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application  
contents.ADDRESS TO: Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-14501. ☒ Fee Calculation Form (e.g., PTO/SB/17)  
(submit an original and a duplicate for fee processing)2. ☐ Applicant claims small entity status.3. ☒ Specification [Total Pages 46]

(Preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a  
computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 USC 113) [Total Sheets 6]

5. Oath or Declaration [Total Pages 6]

a. ☐ Newly executed (original or copy)b. ☐ Copy from a prior application (37 CFR 1.63(d))

(for continuation/divisional with Box 18 completed)

i. ☐ **DELETION OF INVENTOR(S)**Signed statement attached deleting  
inventor(s) named in the prior application,  
see 37 CFR 1.63(d)(2) and 1.33(b).c. ☒ Unexecuted (to identify inventorship)6. ☐ Application Data Sheet. See 37 CFR 1.767. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)8. Nucleotide and/or Amino Acid Sequence  
Submission (if applicable, all necessary)a. ☐ Computer Readable Form (CRF)b. ☐ Specification Sequence Listing on:i. ☐ CD-ROM or CD-R (2 copies); orii. ☐ paperc. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)11. ☐ English Translation Document (if applicable)12. ☐ Information Disclosure Statement(IDS)/PTO-1449 ☐ Copies of IDS Citations13. ☐ Preliminary Amendment14. ☒ Return Receipt Postcard (MPEP 503)

(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)

(if foreign priority is claimed)

16. ☐ Request and Certifications under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form  
PTO/SB/35 or its equivalent.17. ☐ Other18. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a  
preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: , filed

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an  
oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying  
continuation or divisional application and is hereby incorporated by reference. The incorporation can only be  
relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 000027777 or ☐ Correspondence Address below

Name: Philip S. Johnson, Esq.

Address: Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003 USA

## 20. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to Linda S. Evans at:

Telephone: (858) 320-3406 Fax: (858) 784-3044

## 21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME Linda S. Evans (Reg. No. 33,873)

SIGNATURE

DATE January 6, 2004

EV291407865US

# FEE CALCULATION FORM

Complete if Known

Application Number	Unknown
Filing Date	herewith
Applicant	Anton Bittner et al.
Attorney Docket Number	ORT1563NP

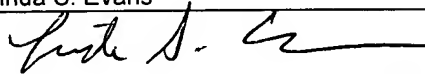
## FEE CALCULATION

### CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	36 - 20 =	16	x 18.00	\$288.00
INDEPENDENT CLAIMS	7 - 3 =	4	x 86.00	\$344.00
MULTIPLE DEPENDENT CLAIMS	0	N/A	\$290.00	
			TOTAL FEES	\$1,402.00

## METHOD OF PAYMENT

- ☐ Please charge Deposit Account No. 10-0750/ORT1563NP/LSE in the total amount calculated above. A duplicate of this sheet is enclosed.
- ☐ The Commissioner is hereby authorized to charge any additional fees that may be required in connection with the filing of the accompanying application, or credit any overpayment, to Deposit Account No. 10-0750/ORT1563NP/LSE.
- ☐ The Commissioner is hereby authorized to generally charge any fees set forth at 37 C.F.R. §§ 1.16-1.18 that may be required in connection with the accompanying application, and credit any overpayments, to Deposit Account No. 10-0750/ORT1563NP/LSE.
- ☒ The application is being filed with deferral of payment of the filing fees.

<b>SUBMITTED BY:</b>		Complete (if applicable)
Typed or Printed Name	Linda S. Evans	Reg. No. 33,873
Signature		Deposit Account No. 10-0750
Date: January 6, 2004		